

Periscope.

CENTRALBLATT FUER NERVENHEILKUNDE UND PSYCHIATRIE

(Vol. 14, 1903, No. 5, May.)

1. The Conception of Compulsive Ideas as a Safeguard Neurosis (Abwehr-neurose). WILHELM STROHMAYER.

Strohmayer quotes Freud's definition, "Compulsive ideas are always transformed reproaches which arise from a sexual or sensual act in childhood"; they are the tormenting tug from a consciousness of guilt, which serves to protect from the habit. Strohmayer gives a full account of a case which seems to support this theory.

(Vol. 14, 1903, No. 6, June.)

1. On Morbid Anxiety of Professional Character—"Anxiety of Sacrament-Administration" in Priests. W. VON BECHTEREW.
2. Lumbar Puncture and Cytodiagnosis. ALBERT DEVAUX.

1. *Sacrament Anxiety in Priests.*—Von Bechterew says that there are special morbid anxieties related to particular callings, and that these are apart from the general anxious states which arise from evident pathological predisposition. The symptoms of "sacrament anxiety" appear at the approach of the hour for administering the rite, and consist of palpitation of the heart, an agonized fear of blundering, uncertainty of the voice, trembling of the whole body, prickling in arms and legs, etc. All these symptoms disappear if the priest turns back from the altar. Giving up this service for two or three months led to no improvement in the case described. The patient was about 60 years old, had a good family record, and physical examination was negative. Von Bechterew says this affection is not rare. In treatment he advises that the occupation of the victim be given up. If that is not feasible, then prolonged rest, hydrotherapy, sedative nervines, and suggestion under hypnosis are the remedies.

2. *Lumbar Puncture and Cytodiagnosis.*—Devaux has written an excellent essay on the technic and application of Quincke's lumbar puncture.

(Vol. 14, 1903, No. 7, July.)

1. Some Remarks on the Principles of Investigation of Hysteria. L. LOEWENFELD.
2. Contributions to the Knowledge of the Movements of the Iris. BUMKE.
3. On Color and Space. P. J. MÖBIUS.
4. The Sources of Failure with the Marchi Method. WALTHER SPIELMEYER.

1. *The Investigation of Hysteria.*—Loewenfeld says that in the last two decades the efforts to establish the nature of this interesting disease have had scant results, one theory following another without displacing it. First came the *suggestion-theory*, which made all manifestations of hysteria dependent upon the patient's ideas; next, Janet's psychasthenic theory laid stress on a narrowing of the field of consciousness; after that, Freud's sexual-psychologic and Sollier's sleep-theories, the newer emotion-theory and a revival of the old reflex theory. Loewenfeld believes with Huchard, Charcot et al., that the "hysterical character" may be entirely absent in the disease, this so-called character being often only a complicating psychopathic degeneracy. It may, for instance, be wanting in cases of hysteria

due to alcoholism. Loewenfeld speaks of the difficulty of drawing a line between symptoms of hysteria and of neurasthenia. He doubts whether *globus* and esophageal-spasm are specific hysterical symptoms. We need detailed studies to build stone upon stone, a proper conception of hysteria.

2. *The Movements of the Iris*.—Bumke's paper is a preliminary communication on the "galvanic light reflex." Helmholtz and others showed that a light-sensation is occasioned by weak galvanization of the eye; but apparently no one studied the pupil under these circumstances. Bumke finds that the pupil contracts when the eye is galvanized, just as if exposed to a brighter light, but the movement of the iris is so slight that he employs the Zehender-Westien magnifying lens to study it. A current-strength of two or three milliamperes caused, upon anodal closure, a narrowing of both pupils of from one to two millimeters. The reflex apparatus quickly tires under these tests. The galvanic light reflex follows the laws of the light reflex. Bumke by appropriate tests proved its independence of the oculomotor, of the trigeminus, of the Westphal-Piltz phenomenon and of the pupil-contraction which Lukacz, McCarthy and others have shown to accompany the ophthalmic reflex. The galvanic current evidently acts, in this case, upon the retina.

3. *On Color and Space*.—Möbius' paper is physiological and psychological, and not of direct clinical interest.

4. *The Sources of Failure with the Marchi Method*.—Spielmeyer says that the chrom-osmic acid method was first set forth by Marie, briefly, in 1885; but Marchi and Algeri modified it so that it became a regularly-used method. The chemistry of the process is still dark. Sections stained by it cannot be read off as are Weigert preparations; "they demand a critical judgment," as Nissl says. The black droplets may be too few or too abundant. In the former case it may be that the soaking in osmic acid was not thorough enough or that the alcohol used afterward has dissolved the droplets. Spielmeyer does not favor the method of gradual concentration of the osmic solution; nor the addition of sodium iodide to it, which Busch recommended, nor Raimann's plan of cutting sections in paraffin, and then staining with Marchi's fluid, having first hardened in Muller's. With the best technic the Marchi method yields incongruous results sometimes, due perhaps to conditions in the nerve fibers themselves. Thus in many cases normal Marchi sections show black specks and granules in the nerve fibers. These are smaller than the degeneration-droplets. Such granules are seen near the vessels in seniles and in paralytics; and they may form black masses in the interstices and at the periphery in polyneuritis. Granules are found in the intra-medullary roots of the cord in the new-born and in children. A second group of these pseudo-Marchi reactions is caused by technic. Cutting or tying pieces of the cord, or pressure upon the roots, may give rise to a mass of black droplets. Of the hardening agents Müller's fluid is the best. The combination of it with formol is condemned because of the blackening effect which may simulate a Pal-preparation. The duration of the chromicizing process is of little importance—it may be from eight days to six months. Sudan III and scarlet red may be used for "control" staining, but the worker should learn to distinguish what is true Marchi reaction and what artefact.

(Vol. 14, 1903, No. 8, August.)

1. Contributions to the Knowledge of the Movements of the Iris. BUMKE.
2. Clinical Experiences with Veronal. WALTHER SPIELMEYER.
3. On the Present Position of the Pathological Anatomy of the Central Nervous System. NISSL.

1. *The Movements of the Iris*. II. *On Methods*.—This paper of Bumke's follows that on the galvanic light-reflex which appeared in the

July *Centralblatt*. In his studies he used Sommer's apparatus for permitting only a fine pencil of light to enter the eye. To measure the pupil he made use of a pupilometer invented by himself, and he combined this ingeniously with the Westien lens. This paper deals with the various refinements of technic which Bumke has developed in his studies of the pupil reflexes.

2. *Clinical Experiences with Veronal*. Spielmeyer has tested this drug, which was reported by E. Fischer and J. von Mering to be the most useful of the new class of hypnotics studied by them. Spielmeyer gives his experience of 450 doses of the drug, ranging from one-half to two grams each, in hot milk or tea, or in wafers. This experience is favorable. Sleep ensued as a rule after about half an hour; in severe insomnia, after $1\frac{1}{2}$ to 2 hours. Scarcely any unpleasant effects were observed,—no gastric or intestinal symptoms, and nothing to contraindicate its use in arteriosclerosis or heart disease. Jolly and Oppenheim have mentioned a kind of drunkenness or some heaviness in rare cases. Occasionally a macular rash appears. Spielmeyer concludes that veronal is a good sedative and above all one of the most valuable hypnotics.

3. *The Present Position of the Pathological Anatomy of the Nervous System*.—Nissl's reflections on the development of the branch in which he is so distinguished are instructive and entertaining. He speaks of three periods in this development: the *first* ending in 1860 with the researches of Max Schultze, Deiters and Gerlach—the histological period; the *second* comprising two decades, was dominated by Meynert—the period of fiber anatomy, in the latter part of which Weigert's method appeared, also Guden's and Flechsig's methods and studies of cortical localization; the *third* period, beginning in 1890, is marked by the Golgi method and the neurone doctrine. The greatest progress at present is being made along the lines of histo-pathology.

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NEUROLOGISCHES OENTRALBLATT

(Vol. 22, 1903, No. 12, June 16.)

1. The Weight of Brains and Parts of Brains of Infants and Older Children. H. PFISTER.
2. A Contribution to the Diagnosis of Tumors of the Thalamus and Frontal Lobe. BAYERTHAL.

1. *The Weight of Brains of Infants*.—Pfister in this article gives a résumé of all the work he has done on brain weights. He has examined 302 brains, of which 161 were from males and 141 from females; 228 of these brains were used for partial weighing. The children from whom these brains were obtained were from one week to fourteen years of age, and were inmates of a charity institution. Only normal brains were used, all pathological conditions being rejected. The tables as given show how the work was done. Some of the conclusions Pfister reaches are as follows: The total brain weight of boys is larger than that of girls, this difference in the beginning of life is small (10-15 gr.), but becomes greater as life advances. In the developmental period the brains of boys gain more weight than those of girls. The relation of weights is not constant, but varies considerably. The absolute weight of the cerebellum is smaller in the female, and in the course of development the cerebellum of the male gains more rapidly. The relative weights of the cerebellum varies in children of the same sex and age. The cerebellum grows faster, especially in the first, third and second third period of life, than the whole rest of the brain. The weight of the middle cerebrum is larger in the boys than in the girls in all conditions. The weight of the cerebrum also varies considerably in brains